

NE

CLAIMS ONLY							Application Number 89/631892		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	
101								51				
102								52				
103								53				
104								54				
105								55				
106								56				
107								57				
108								58				
109								59				
110								60				
111								61				
112								62				
113								63				
114	1							64				
115								65				
116		1						66				
117								67				
118								68				
119		1						69				
120								70				
121								71				
122								72				
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124								74				
125								75				
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139								89				
140								90				
141								91				
142								92				
143								93				
144								94				
145								95				
146								96				
147								97				
148								98				
149								99				
150								100				
Total Indep	5							Total Indep				
Total Depend	30							Total Depend				
Total Claims	55							Total Claims				

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CLAIMS ONLY							Application Number 09/63/842		Filing Date			
							Applicant(s)					
							* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
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30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep							Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					